97-14-06

PTO/SB/17 (01-06)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/666,858-Conf. #5760 **Application Number** FEE TRANSMITTAL Filing Date September 19, 2003 For FY 2006 Toshiro Harakawa First Named Inventor Examiner Name D. J. Jenkins 1742 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 09852/0200074-US0 TOTAL AMOUNT OF PAYMENT 120.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order None x Check Credit Card Other (please identify): Darby & Darby P.C. Deposit Account Number: 04-0100 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Small Entity Small Entity Small Entity Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) 300 500 250 200 100 Utility , 150 130 65 200 100 100 50 Design 300 150 160 80 Plant 200 100 250 600 Reissue 300 150 500 300 200 100 0 0 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 Each claim over 20 (including Reissues) 25 200 Each independent claim over 3 (including Reissues) 100 Multiple dependent claims 360 180 Multiple Dependent Claims **Total Claims** Extra Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) 12____ - 20 = ____ Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee Paid (\$) HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00 SUBMITTED BY Registration No. 47,522 Telephone (212) 527-7791 Signature (Attorney/Agent) July 12, 2006 Date Name (Print/Type)

PTO/SB/22 (12-04)
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005				Docket Number (Optional) 09852/0200074-US0	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)					
Application Number 10/666,858-Conf. #5760				Filed September 19, 2003	
For INTEGRATED SPROCKET AND HOUSING AND MANUFACTURING METHOD THEREFOR					
Art Unit 1742			Examiner D. J. Jenkins		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
	X One month	n (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity Fee \$60	\$ 120.00
	물	ns (37 CFR 1.17(a)(2))	\$450	\$225	\$
	Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4))		\$1020	\$510	\$
			\$1590	\$795	. \$
	Five month	ns (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27. X A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment Deposit Account Number 04-0100 . I have enclosed a duplicate copy of this sheet.					any overpayment, to
I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number 47,522 attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34					
July 12, 2006					2, 2006
Signature				Date	
Louis J. DelJuidice			(212) 527-7791		
Typed or printed name				Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
	Total of	1 forms are submit	tted.		

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